

Health Resource Allocation Plan Certificate of Need Process:

Washington State
CON Task Force
January 3, 2006

Bruce Darwin Spector, Esq.

- **Effectiveness starts with scope:**
 - **Why does it exist (goals and purposes)**
 - **What is covered (things)**
 - **Who is covered (entities)**
 - **When does it apply (thresholds)**
 - **How is it implemented (staff, resources and procedures)**

Act 53 Reforms

- Health Resource Allocation Plan
- Hospital Community Reports
- Billback for consulting needs in reviews
- Under oath/Criminal penalties
- Community Needs Assessments
- Linkage to State Health Plan
- Linkage to bonding agency

What Is the Health Resource Allocation Plan (HRAP)?

The HRAP, adopted by the Governor August 2, 2005, is a four-year plan that identifies (1) Vermont's **needs** in health care services, programs and facilities, (2) the **resources available** to meet those needs, and (3) the **priorities** for addressing those needs on a statewide basis.

Program Effectiveness

- **Covers all entities but non-hospital physician's offices**
- **Thresholds not too high**
- **Billback for costs of review**
- **Adequate technical consultants**
- **Prevents unbundling of projects**
- **Broad “conditions” authority**

Program Effectiveness

- **Criminal penalties and fines**
- **Bond agency connected to CON process**
- **Conceptual CON for projects > \$20M**
- **“By or on behalf of” strengthened**
- **No time limit**
- **Linked to Hospital budget filings**
- **“Capital expenditure” definition broad**

Program Effectiveness

- **Heightened public awareness and involvement**
- **CONs not transferable**
- **Continuing jurisdiction**
- **Implementation reporting**
- **CEO verification under oath**
- **Data from HRAP and other sources**

Program Effectiveness

- **Many meetings between applicant and staff- guidance in submitting thorough application**
- **Face-to-face meetings between applicant and State's consultants – improves communication, speeds review.**
- **On-line application form**